LEGISLATIVE SERVICES AGENCY OFFICE OF FISCAL AND MANAGEMENT ANALYSIS

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FISCAL IMPACT STATEMENT

LS 7868 NOTE PREPARED: Jan 15, 2007

BILL NUMBER: HB 1813 BILL AMENDED:

SUBJECT: Spinal Cord and Brain Injury Trust Fund.

FIRST AUTHOR: Rep. Mays BILL STATUS: As Introduced

FIRST SPONSOR:

FUNDS AFFECTED: X GENERAL IMPACT: State & Local

 $\overline{\underline{X}}$ DEDICATED FEDERAL

<u>Summary of Legislation:</u> This bill creates the Spinal Cord and Brain Injury Registry and the Spinal Cord and Brain Injury Research Board to advise the State Department of Health on the Registry and plans to fund spinal cord and brain injury research and grants.

The bill creates the Spinal Cord and Brain Injury Fund to be funded with additional court fees for speeding and passenger restraint infractions. The bill also appropriates continually money in the Fund to the State Department of Health.

Effective Date: July 1, 2007.

Explanation of State Expenditures: Spinal Cord and Brain Injury Fund: This bill establishes the Spinal Cord and Brain Injury Fund to fund research on spinal cord and brain injuries. The Fund is to be administered by the Indiana State Department of Health (ISDH). The Fund consists of appropriations, gifts and bequests, fees deposited in the Fund (see Speed Limit/Passenger Restraint System Infraction Fees), and grants received from the federal government or private sources. The expenses of administering the Fund shall be paid from money in the Fund. Money in the Fund does not revert to the state General Fund at the end of a state fiscal year.

Of the money in the Fund, \$500,000 is annually appropriated to each of Indiana University and to Purdue University for spinal cord and brain injury research, and the balance is continually appropriated to the ISDH to fund spinal cord and brain injury research programs.

The Fund is to be used for: (a) establishing and maintain a state medical surveillance registry for traumatic

HB 1813+ 1

spinal cord and brain injuries; (b) fulfill the duties of the Spinal Cord and Brain Injury Research Board; and (c) fund research on spinal cord and brain injuries.

Spinal Cord and Brain Injury Research Board: The bill creates the Spinal Cord and Brain Injury Research Board for the purpose of administering the Fund. The Board is composed of nine members and is required to meet at least two times each year; however, the chairperson may call additional meetings at the request of a majority of the members of the Board. The ISDH is required to provide staff for the Board. The ISDH should be able to do so within its existing level of resources.

The Board is required to do the following: (1) consider policy matters relating to spinal cord and brain injury research projects and programs; (2) consider research applications and make grants for approved research projects; (3) formulate policies and procedures concerning the operation of the Board; (4) review and authorize spinal cord and brain injury research projects and programs; (5) review and approve progress and final research reports on projects; (6) review and make recommendations concerning the expenditure of money from the Fund; (7) advise the ISDH on formation of the registry; (8) take other action necessary related to administering the Fund; and (9) provide to the Governor, the General Assembly, and the Legislative Council an annual report not later than January 30 of each year showing the status of funds appropriated to the Fund.

Members of the Board are entitled to a minimum salary per diem under IC 4-20-11-2.1(b) of \$35. Currently, this statute is overridden by Section 15 of the budget bill which provides a higher reimbursement of \$50. It should be noted that should the budget bill dictate a different amount of reimbursement in the future, or not address reimbursement, this reimbursement level could change. Members are also entitled to reimbursement for traveling expenses and other expenses actually incurred in connection with the member's duties.

Statewide Spinal Cord and Brain Injury Registry: The bill requires the ISDH to establish and maintain a Spinal Cord and Brain Injury Registry. The Registry is to include reports of persons who have sustained spinal cord or brain injuries, other than through disease, whether or not the injury results in a permanent disability. The Registry is required to include data on the incidence and prevalence of spinal cord and brain injuries. Health care providers are required to report spinal cord and brain injuries to the ISDH. The actual cost of the Registry would depend on administrative action taken by the ISDH. Potentially some of the costs of the Registry could be offset from dollars deposited in the Fund.

Adoption of Rules: The bill requires the ISDH to adopt rules to implement the requirements of the bill. The ISDH should be able to do so within its existing level of resources.

Explanation of State Revenues: Speed Limit/Passenger Restraint System Infraction Fees: The bill requires a clerk to collect a speeding fee of \$23 for each speed limit infraction and a passenger restraining fee of \$23 for each passenger restraint system infraction. Clerks should be able to do so within their existing level of resources.

The bill requires a clerk of a circuit court to distribute monthly to the Auditor of State the aforementioned speeding and passenger restrain fees for deposit in the Fund. The Bureau of Motor Vehicles (BMV) reports that during CY 2005 there were 256,120 persons who were found guilty of a speed limit infraction and 92,033 persons who were found guilty of a passenger restraint system infraction. Assuming these numbers remain consistent, the Fund would receive approximately \$5.9 M in fees from speed limit infractions and \$2.1 M from passenger restraint system infractions, totaling approximately \$8 M.

HB 1813+ 2

Explanation of Local Expenditures: See Explanation of State Revenues.

Explanation of Local Revenues:

State Agencies Affected: Indiana State Department of Health; Indiana University; Purdue University.

Local Agencies Affected: Clerks of the Court.

Information Sources: Bureau of Motor Vehicles; Brian Carnes, Indiana State Department of Health.

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HB 1813+ 3